



Lynchburg Parks & Recreation

SCHOLARSHIP APPLICATION

Application required for EACH person and EACH activity applied for.
Recipients are required to pay at least half of the program / activity fee.

PROGRAM AREA

____ Arts ____ Aquatics
____ Athletics ____ Naturalist
____ YNS ____ Seniors

FOR STAFF USE ONLY SCHOLARSHIP VERIFICATION

Previous Recipient: Y N ?

Activity Cost: \$ _____

Paid by participant: \$ _____

Receipt: # _____

Scholarship Amount
(1/2 of program fee): \$ _____

Code: _____

Comments: _____

Date: _____

Received by: _____

Supervisor Initials:
Approved _____ Denied _____

Date Keyed: _____

Initials: _____

APPLICANT / PARTICIPANT NAME (Please print) AGE (If under 18)

ADDRESS

CITY / STATE / ZIP

(_____) (_____) _____
DAY PHONE NIGHT PHONE

(_____) _____
CELL PHONE

E-MAIL ADDRESS (Use Ø for zero)

Please give a short reason why you are in need of this scholarship.

DESIRED ACTIVITY ACTIVITY #

ACTIVITY DATE ACTIVITY COST

SCHOLARSHIP APPLICATION TERMS & GUIDELINES

- A. Application recipient must:
1. Be a City of Lynchburg resident.
 2. Pay at least half of the program cost by program deadline.
 3. Provide evidence of financial need such as:
 - a. A Virginia Cardinal Card or Medicaid Card or,
 - b. Provide a short statement of why you are applying for this scholarship.
 4. Scholarship Application must be filled in completely.
- B. All scholarships are subject to availability of funds and will be awarded per activity, primarily on a first-come, first-served basis for eligible applicants.
- C. To serve more citizens, new applicants may be given priority over previous recipients .
- D. The City may be required to make information on this application available through the "Freedom of Information Act."
- E. Certain programs may have a scholarship limit.

I, the undersigned, have read this application, understand and agree to its terms, and verify all information is accurate.

X

SIGNATURE (A parent/guardian must sign for a minor)

PLEASE PRINT PARENT NAME

DATE

(_____) _____

DAY PHONE OF PARENT / GUARDIAN

(_____) _____

NIGHT PHONE OF PARENT / GUARDIAN